LOBBYIST ANNUAL REPORT FORM



State of Idaho

To Be Filed By:

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Ben Ysursa Secretary of State JAN | L AM 8: 44

LOBBYISTS (Sec. 67-6619)

SECRETAR 1	Andlai	
dans -4 144 0		

]Semi-Annual

	See instructions												
Lobbyis	t's name and permanent busin	ness addre	ess			D	ate p	repared			Period	covered	
	ee Meyer											year end	ing
	V. Washington e, ID 83702							1-8-08	3		(Mo.) (Day)	(Yr.)
Doile	, 15 00/02										12	31	07
Item 1	Totals of all reports	ible expe	enditures made o	r incurred	d by Lobl	yist	or by	Lobbyist's Emp	loyer on	behalf o	of Lobb	yist's Emplo	yer.
Ca	ategory of Expenditure	+ 77	1.1					buted by each emp	loyer (Id	entify e	mployer	s, under	
Reimbursed Personal Living and Travel Expenses Pertaining to Lobbying Activity Do Not Have to be Reported		1	*Total Amount for All Employers	Item 3, at bottom of		1.0							
				Employer No. 1		1 E		Employer No. 2	Employer No		0. 3	Employer No. 4	
Enterta Food ar	inment nd Refreshment	\$	0.00	\$			\$		\$			\$	
Living A	Accommodations		0.00										
Adverti	sing		0.00										
Travel			0.00				_						
Telepho	one		0.00				_						
Other E	expenses or Services		0.00				_						100
							-						
	Total	\$	0.00	s	0.0	00	\$ _	0.00	\$		0.00	s	0.00
*When	the number of employers ye	u are re	porting for require	es multiple	e L-2 forr	ne to	he fi	led a total amount	for all e	mplover	e chaul	d he entered	on Page 1
Item	The totals of each expend												on rage 1.
	Date		Place		A	moun		Names of Legis	slators, Pu	iblic and	Execu	tive Officials	in Group
	NA		NA			NA				NA	\		
	Continued on attached page(s		IONE			It	em	E	mplovor(s)	Nomo(e) and A	ddress(es)	
	11/15	TRUCT	10/15				3	E	iipioyei(s)	Name(s) and A	duless(es)	
	o should file this form: 7 6617 Idaho Code	Any lobb	yist registered u	nder Sect	tion	No.	1 1	daho Prosecu	ting Att	orneys	S Asso	ciation	
Fili	ng deadline: Annual repo Executive L	ort is due obbist se	on January 31st emi-annual repor	i. t due July	y 31st.	No.	2	IDAHO				EYS ASSOCIA	ATION
то	BE FILED WITH:									W. W/ OISE,		GTON 3702	
1		Ben Ysur				No.	3		_	J ,			
	Po	retary of D Box 83	3720										
	Boise Phone: (208) 334-	, ID 8372 2852		282		No.	4						

				nployer in the nature of contributions ficial or for or on behalf of any Legislat							
	Date	Amount	Nan	ne of Legislator, Public or Executive Official Receiving or Benefiting							
•	NA	NA	NA								
Subject matter of proposed legislation, the number of the Senate or House Bill, Resolution or other legislative activity in which			LEGISLATIVE SUE	BJECT	IDENTIFICATION						
or H	ode Bill, R le) Legisla	was supporting or op Resolution or Other ative Ident. Number SB 1032 SB 1066	Appropriation Bill Number and Section Number	Code Subject O1 Agriculture, horticulture, farming, and livestock O2 Amusements, games, athletics and sports O3 Banking, finance, credit and investments O4 Children, minors, youth, senior citizens O5 Church and religion O6 Consumer affairs O7 Ecology, environment, pollution, conservation, zoning, land and water use Education O9 Elections, campaigns, voting, political parties 10 Equal rights, civil rights, minority affairs 11 Government, financing, taxation, revenue, budget, appropriations, bids, fees, funds 12 Government, county 13 Government, federal 14 Government, municipal 15 Government, special districts 16 Government, state	20 21 22 23 24 25 26 27 28 29 30 31	Subject Health service, medicine, drugs and controlled substances, health insurance, hospitals Higher education Housing, construction, codes Insurance (excluding health insurance) Labor, salaries and wages, collective bargaining Law enforcement, courts, judges, crimes, prisons License, permits Liquor Manufacturing, distribution and services Natural resources, forest and forest products, fisheries, mining and mining products Public lands, parks, recreation Social insurance, unemployment insurance, public assistance, workmen's compensation Transportation, highways, streets and roads Utilities, communications, televisions, radio, newspaper, power, CATV, gas Other (please specify)					
Item 6	contract bid		lecision, procurement, ancial services agreement or opposing.	CERTIFICATION: I hereby certify the correct statement in accordance with Lobhyist signature Employer No. 1 signature Employer No. 2 signature Employer No. 3 signature							
				Employer No. 4 signature		Date					